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03/25/2004

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(Depositor's name) Connie del Castillo (Signature) (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/602,510	06/24/2003	Marthew J. Comard	. 01-866/1D	2192		

TITLE OF INVENTION: INTEGRATION OF SEMICONDUCTOR ON IMPLANTED INSULATOR

	70	\$1330 RT UNIT	S300 CLASS-SUBCLASS	TOTAL FEE(S) DUE \$1630	06/25/2004
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ishno, dinibila b		2812	257-007000		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1/863).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  D "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name		a, Neely & Graham

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(A) NAME OF ASSIGNED

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

LSI Logic Corporation	Milpitas, CA						
Please check the appropriate assignee category or categories (	Il not be printed on the patent);  individual  eorporation or other private group entity  eorporation						
4a. The following fee(s) are enclosed:	4b. Payment of Fee(s):						
☐ Issue Fee	A check in the amount of the fee(s) is enclosed.						
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TOTAL AMOUNT OF PAYMENT

**Application Number** 10/602,510 Filing Date June-24, 2003 First Named Inventor **Matthew Comard** 2812 Group Art Unit Stanetta D. Isaac Examiner Name Attorney Docket No. 57150.D1 / 01-866/1D

Complete if Known

METHOD OF PAYMENT (check one)	<u> </u>		Ì	FEE C	ALCULATION (continued)	
	3. A	DITIO	DNAL	FEES		
The Commissioner is hereby authorized to charge indicated fees and credit any over payment to:  Deposit Account  12-2252	Large Fee Code	Entity Fee (\$)	Large Fee Code	Entity Fee (\$)	Fee Description Fee Paid	
Number 12-2232	105	130	205	65	Surcharge - late filing fee or oath	
Deposit Account LSI LOGIC CORPORATION	127	50	227	25	Surcharge - late provisional filing fee or cover sheet	
Number	139	130	139	130	Non-English specification	
Charge Any Additional Fee Charge the Issue Fee Set in 37 C.F.R. 1.18 at the	147	2,520	147	2,520	For filing request for reexamination	
required Under 37 Mailing of the Notice of	112	920*	112	920	Requesting publication of SIR prior to Examiner action	
2. Payment Enclosed:  Check Money Officer	113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
Order Owner	115	110	215	55	Extension for reply within first month	
FEE CALCULATION	116	400	218	200	Extension for reply within second mont	
1. BASIC FILING FEE	117	950	217	475	Extension for reply within third mont	
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Code (\$) Code (\$)	128	2,060	228	1,030	Extension for reply within fifth mont	
101 790 201 395 Utility filing fee	119	310	219	155	Notice of Appeal	
106 330 206 165 Désign filing fee	120	310	220	155	Filing a brief in support of an appea	
107 540 207 270 Plant filing fee	121	270	221	135	Request for oral hearing	
108 790 208 395 Relssue filing fee	138	1,510	138	1,510	Petition to institute a public use proceedin	
114 150 214 75 Provisional Filing fee	140	110	240	55	Petition to revive - unavoidabl	
SUBTOTAL (1) (\$) 0.00	141	1,320	241	660	Petition to revive - unintentional	•
2. EXTRA CLAIM FEES	142	1,320	242	660	Utility issue fee (or reissue 4900	1330
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Independent X =	122	130	122	130	Petitions to the Commissioner	
Multiple Dependent =	123	50	123	50	Petitions related to provisional application	
"or number previously paid, if greater, For Reissues, see below	126	240	126	240	Submission of Information Disclosure Stm	
Large Entity Fee Fee Fee Fee Description Code (\$) Code (\$)	581	40	581	40	Recording each patent assignment per property (times number of properties)	
103 22 203 11 Claims in excess of 20	146	790	246	395	Filing a submission after final rejection (37 CFR 1.129 (a))	
102 82 202 41 Independent claims in excess of 3	149	790	249	395	For each additional invention to be	
104 270 204 135 Multiple dependent claim, if not paid					examined (37 CFR 1.129 (b))	
109 82 209 41 **Reissue independent claims over original patent 110 22 210 11 **Reissue claims in excess of	Other fee (specify) Publ		Pub	lication Fee 300		
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SUBMITTED BY  Typed or	··				Complete (if applicable)	
printed name   Ismothy Croll				_	Reg. Number 36,771	
Signature 25 R G-DI		Date	91	PROC	Deposit Account User ID	

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